## FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)	•			
MacArthur, Thomas, , ,				
(b) Address (number and street) PO Box 999			Candidate's FEC Identification Number     H4NJ03130	
(c) City, State, and ZIP Code			3. Is This New Amended	
Edison			Statement (N) OR (A)	
4. Party Affiliation	5. Office Sought	6. State & Dis	strict of Candidate	
REPUBLICAN PARTY	House	NJ	. 03	
DE	ESIGNATION OF PRINCIPA	L CAMPAIG	N COMMITTEE	
7. I hereby designate the following na	amed political committee as my Principa	al Campaign Com	nmittee for the 2018 election(s). (year of election)	
NOTE: This designation should be	filed with the appropriate office listed in	n the instructions.		
(a) Name of Committee (in full)		• *		
TOM MACARTHUF	R FOR CONGRESS INC.		,	
(b) Address (number and street) PO Box 999			•	
(c) City, State, and ZIP Code		······································		
Edison		NJ	08818-0999	
I hereby authorize the following national candidacy.	med committee, which is NOT my princ	cipal campaign co	ommittee, to receive and expend funds on behalf of my	
NOTE: This designation should be	filed with the principal campaign comm	nittee.		
(a) Name of Committee (in full)	<del></del>		<del></del>	
Young Guns Day II	2014	•		
(b) Address (number and street) 228 S Washington St				
(c) City, State, and ZIP Code	· · · · · · · · · · · · · · · · · · ·			
Alexandria		VA	22314-5408	
l certify that I have ex	ramined this Statement and to the best	of my knowledge	and belief it is true, correct and complete.	
Signature of Candidate			Date	
MacArthur, Thomas, , ,	11		02/23/2017	
1/4/			02/23/2017	
NOTE: Submission of false, erroneous	s, or incomplete information may subject	ct the person sign	ning this Statement to penalties of 2 U.S.C. §437g.	

# 2017-03-03-03-00143215

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003) [ ADDITIONAL ] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) The Tom MacArthur Victory Fund (b) Address (number and street) PO Box 9891 (c) City, State and ZIP Code Arlington VA 22219-1891 [ ADDITIONAL ] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code [ ADDITIONAL ] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code

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(3/2015)		· · · · · · · · · · · · · · · · · · ·